	MARSH		CERTIFIC	ATE OF IN	ISURANCE		FICATE NUMBER 000896688-08	
PRO	MARSH USA INC. 1225 17TH STREET, SUITE DENVER. CO 80202-5534	E 2100	NO RIGHTS UP POLICY. THIS	PON THE CERTIFICATE	MATTER OF INFORMATION ON E HOLDER OTHER THAN THOSE NOT AMEND, EXTEND OR ALTE RIBED HEREIN.	NLY AND	CONFERS DED IN THE	
DEITTEN, OF GOLDE GOOT				COMPANIES AFFORDING COVERAGE				
			COMPANY	The control of the state of the		(N.C.		
J59009-12345-PL-				A ZURICH AMERICAN INSURANCE COMPANY				
MACTEC ENGINEERING AND CONSULTING, INC. 1105 SANCTUARY PARKWAY, SUITE 300			COMPANY B A	MERICAN INTER	NATIONAL SOUTH INSU	RANCI	F CO.	
			COMPANY					
	PHONE: (770) 360-0600 ALPHARETTA, GA 30004	25542454676740000 CT	2000 SECTION CONTROL OF THE CONTROL					
			COMPANY	COMPANY				
CO	VERAGES						Thomas was that	
	THIS IS TO CERTIFY THAT POLICIES ON NOTWITHSTANDING ANY REQUIREMENT PERTAIN, THE INSURANCE AFFORDED BLIMITS SHOWN MAY HAVE BEEN REDUCE	TERM OR CONDITION OF ANY CONTRACT THE POLICIES DESCRIBED HEREIN IS	CT OR OTHER DOCUMENT	WITH RESPECT TO W	HICH THE CERTIFICATE MAY B	E ISSUE	D OR MAY	
CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIN	мітѕ		
	GENERAL LIABILITY				GENERAL AGGREGATE	\$	2,000,000	
Α	X COMMERCIAL GENERAL LIABILITY	GLO 225862808	09/01/05	09/01/06	PRODUCTS - COMP/OP AGG	\$	2,000,000	
	CLAIMS MADE X OCCUR				PERSONAL & ADV INJURY	\$	1,000,000	
	OWNER'S & CONTRACTOR'S PROT	7			EACH OCCURRENCE	\$	1,000,000	
	THE STATE OF THE S				FIRE DAMAGE (Any one fire)	\$	250,000	
					MED EXP (Any one person)	\$	5,000	
A A	AUTOMOBILE LIABILITY X ANY AUTO	BAP 225862908 (AOS) TAP 283353908 (TX)	09/01/05	09/01/06 09/01/06	COMBINED SINGLE LIMIT	\$	1,000,000	
	ALL OWNED AUTOS SCHEDULED AUTOS		09/01/05		BODILY INJURY (Per person)	\$		
	X HIRED AUTOS X NON-OWNED AUTOS				BODILY INJURY (Per accident)	\$		
	(1001 TALV (1000) (100)				PROPERTY DAMAGE	s		
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$		
	ANY AUTO				OTHER THAN AUTO ONLY:			
					EACH ACCIDENT	\$		
					AGGREGATE	\$		
	EXCESS LIABILITY				EACH OCCURRENCE	\$	5,000,000	
В	X UMBRELLA FORM	BE2911690	09/01/05	09/01/06	AGGREGATE	\$	5,000,000	
	OTHER THAN UMBRELLA FORM					\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			21/4/VII 4/4/20 NCC (40)	X WC STATU- OTH- TORY LIMITS ER	Trians		
A		WC 225863008 (AOS)	09/01/05	09/01/06	EL EACH ACCIDENT	\$	1,000,000	
Α	THE PROPRIETOR/ PARTNERS/EXECUTIVE X INCL WC 28	WC 283354008 (WI) & (MA)	09/01/05	09/01/06	EL DISEASE-POLICY LIMIT	\$	1,000,000	
	OFFICERS ARE: EXCL			J	EL DISEASE-EACH EMPLOYEE	\$	1,000,000	
С	PROFESSIONAL LIABILITY	1952560	09/01/05 09/01/06 \$1,000,000 EACH CLAIM \$1,000,000 AGGREGATE					
	CRIPTION OF OPERATIONS/LOCATIONS/VE	HICLES/SPECIAL ITEMS	CANCELLA	TION				
EVIDENCE OF INSURANCE			SHOULD ANY OF THE POLICIES DESCRIBED HEREIN BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE INSURER AFFORDING COVERAGE WILL ENDEAVOR TO MAIL30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED HEREIN, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER AFFORDING COVERAGE, ITS AGENTS OR REPRESENTATIVES, OR THE					
			ISSUER OF THIS CER	RTIFICATE.				
			MARSH USA INC.					

BY: Dorothy A. Stevens

MM1(3/02)

Dorothy O. Stewar

VALID AS OF: 09/21/05